Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return

1978

Ë	u V		1 : 11:1 // 1:1-1 t	-ius annuncia nema a	nd initial)		Last name		Your socia	l security n	umber	
U: IR	RS	Your first name and initial (if joint return, also give spouse's name and initial) Last name										
0	bel. ther- ise,	Present home address (Number and street, including apartment number, or rural route)						;	Spouse's social security no.			
pi pr	ease int type.	City, town or post office, State and ZIP code							Your occupation			
Do you want \$1 to go to the Presidential Election Campaign Fund? If joint return, does your spouse want \$1 to go to this fund? Yes No No No No No No No N									Spouse's occupation			
Filing Status 1 Single For Privacy Act Notice, see page										e 5 of Instruc	tions	
Ľ	umg	<u> </u>		ioint return (eve	n if only on	e had income)	1					
Check Only Married filing joint return (even if only one had income) Married filing separate return. If spouse is also filing, give spouse's social security number in the												
One Box 3 above and enter full name here												
4 Unmarried head of household. Enter qualifying name ▶												
	Exer	nptions							Enter r	number of		
Γ,	lucov	5a	Yourself		65 c	r over		Blind	boxes	checked		
t	he bo	s check ox labeled		1					on 5a a	and b		
										number		
		pply. c	First names of your o	lependent child	ren who live	ed with you	•		of child	dren		
			d Other dependents: (3) Number of (4) Did dependent (5) Did you provide mo					provide more				
			Other dependents: Name	(2) Relationship	months lived have income o in your home. \$750 or more?			ne-half of de- 's support?	e- Enter number of other dependents			
						-						
5												
풀										Add numbers entered in		
7		6 Total number of exemptions claimed								bove	لـــا	
S	7	Wages, salai	ries, tips, and other	employee com	oensation. (Attach Forms	W-2. If you do	not				
Ē		have a W-2,	see page 7 of Instru	ctions)				· · · <u>7</u>	_		_	
Please Attach Copy B of Forms W-2 Here	1											
m	8	Interest inco	ome (see page 4 of I	nstructions)				· · · <u>_8</u>	-		-	
9		- Dividende		Oh Evaluaia			Subtract	line Pa ► 90	.		į.	
ي ا	98	9a Dividends 9b Exclusion 9b from 9a (See pages 4 and 8 of Instructions)									-	
調	1.0	10 Adjusted gross income (add lines 7, 8, and 9c). If under \$8,000, see page 2 of Instructions										
e A	10	on "Earned Income Credit." If eligible, enter child's name ▶ 10										
eas	11:	a Credit for o	contributions to car	ididates for pi	ublic office	.						
┍		Enter one-half of amount paid but do not enter more than \$25 (\$50 if joint return). (See page 8 of Instructions)										
		IF YOU WA	NT IRS TO FIGURI	E YOUR TAX,	PLEASE ST	OP HERE AN	ND SIGN BEL	ow.				
	b Total Federal income tax withheld (if line 7 is larger than \$17,700, see page 8 of Instructions)											
-	1	\$17,700, see page 8 of Instructions)										
l		• Farned inco	me credit (from page	2 of Instruction	ns)	11c						
8		C Edined into	mo oroune (nom page	2 0, 11,01,401,0	,					<i>!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!</i>		
ĮĔ	12	Total (add I	ines 11a, b, and c)					12	<u> </u>		_	
	13	Tax on the a	amount on line 10.	(See Instruction	s for line 13	3 on pag <mark>e 9, t</mark> i	hen find your t	ax in				
9		the Tax Tab	les on pages 14–25.)				<u>13</u>	<u>: </u>		_	
9		W.B. 10 to Leave the Bre 12 celes assessed to be a second to be a second to be a second to be a second to be a										
Ž	14	14 If line 12 is larger than line 13, enter amount to be REFUNDED TO YOU ▶									_	
Total (add lines 11a, b, and c) Tax on the amount on line 10. (See Instructions for line 13 on page 9, then find your tax in the Tax Tables on pages 14–25.) If line 12 is larger than line 13, enter amount to be REFUNDED TO YOU If line 13 is larger than line 12, enter BALANCE DUE. Attach check or money order for full amount payable to "Internal Revenue Service." Write social security number on check or money order Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and state of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is base which preparer has any knowledge. Paid Preparer's social security number on the payable to "Internal Revenue Service." Write social security number on check or money order John Spouse's signature (if filing jointly, BOTH must sign Preparer's social security number on the payable to "Internal Revenue Service." Write social security number on check or money order Date Paid Preparer's social security number on check or money order Proparer's social security number on check or money order Date Preparer's social security number on check or money order Proparer's social security number on check or money order Date Preparer's social security number on check or money order Proparer's social security number on check or money order Date Preparer's social security number on check or money order Preparer's social security number on check or money order Date Preparer's social security number on check or money order Preparer's social security number on check or money order Date Preparer's social security number on check or money order Preparer's social security number on check or money order Date Preparer's social security number on check or money order Preparer's social security number on check or money order Date Preparer's social security number on check or money order Preparer's social security number on check or money order Date Proparer's social sec									<u>.</u>			
E		Under penaltie	s of periury. I declare	that I have exam	ined this retu	rn, including a	ccompanying sc	hedules and	statemen	ts, and to t	he best	
2	2	of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.										
125	of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information which preparer has any knowledge. Your signature Date Preparer's social security no. Check if salt.											
N O	ig	Your signatu	ire		Date	Spouse's sign	nature (if filing join	tly, BOTH mu	st sign even	if only one had	d income)	
Sea	e S	Paid	Preparer's					s social sec	urity no.	Check if	self-	
1	Please	Prenarer's					<u> </u>		employed			
	 	Information	Firm's name (or yours if self-employed),	·				E.I. No.	<u> </u>			
1	1 1		address and ZIP code	7				Date	-			